Governor Phil Bryant's 5k Run for Health June 30th

8:00 AM - Start time Proceeds to Benefit Blair E. Batson Hospital



Race Organiz	ed b	y: Directed by staff	of Governor Phil B	ryant www.gov	erno	rbryant.	.com	
When:		Saturday, June 30, 2012 6:30 to 7:45 am (Race day registration and packet pick-up) 8:00 am 5K race (runners, walkers) Mile Fun Run (after 5K) Early Packet Pickup, June 28-29 th		5K Run/Walk Awards:		Overall male and female winners, master male and female, grand master male and female, and top three in each age group will be awarded prizes. 19 and under, 20-29, 30-39, 40-49, 50 & over. (Awards for Run and Walk are NOT separate)		
		1-6pm @ Republican Par		Mile Awards:				e, 5 and under, 6-
Where:	8	Governor's Mansion 300 East Capitol Street Jackson, MS	Amenities	2	Fruit and Food T-shirts available to all pre-registered early bird entry Pre-registration packet pickup begins at Republican Party Headquarters on June 28-29 from 1:00 P.M. – 6:00 P.M. Online registration @ www.msracetiming.com Send entry forms/fees and make checks			
Course	8	Begins on West Street net Mansion. See <u>www.msra</u> map.	Early Packet Pickup					
Early Bird Entry Fee:		5K Run & 5K Walk fee S Postmarked or arrived by Kids Mile \$10	Registration:					
Late Entry Fee:	:	5K Run & 5K Walk fee S Postmarked or arrived aft Kids Mile \$15			payable to: Commission to Promote MS P.O. Box 80 Jackson, MS 39205			
Circle Event:]	Race Director Use	ONLY
5K Run/Walk		Kids Mile				BIB#		
Circle Shirt Siz Small	ze:	Medium	Large	X-La	rge		XX-Large (add \$	2 to entry fee above)
Name:				Age:				
Gender:				City:			0.0 33	001100-9200-0000
Email								~~~
Phone	()				1.00		
provided by MS during this ever representative w	Race nt are vill all	and representatives knowingly wa Timing LLC, the State of Mississ not the responsibility of the Er ow the Entities to use event picture tary information concerning this e	ippi, Governor Phil Bryant's ntities. The signee and its r es, comments, and media at t	charge all rights and cle Run for Health, and its representative knowingly heir discretion. All partic	assoc v assu	ciations (Ent me all risk	ities). Any and all in involved in this eve	juries or death suffered ent. The signee and its
Participants Signature:				Date:				
Signature of P	arent	or Guardian: (if participant is under 1	8)	9				